

**FEC FORM 5****REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED**

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <b>HUMANE SOCIETY LEGISLATIVE FUND</b>		
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 2100 L Street NW Suite 310		
(c) City, State and ZIP Code WASHINGTON DC 20037-		3. FEC Identification Number <b>C</b> C90009358
2. Occupation and Name of Employer (for Individual Filers Only)		

## 4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report  
☐ July 15 Quarterly Report ☐ 24-Hour Report  
☐ October 15 Quarterly Report ☒ 48-Hour Report  
☐ January 31 Year-End Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on

M M	/	D D	/	Y Y Y Y Y Y

## 5. COVERING PERIOD:

FROM 

M M	/	D D	/	Y Y Y Y Y Y
10		08		2014

THROUGH 

M M	/	D D	/	Y Y Y Y Y Y
10		10		2014

6. TOTAL CONTRIBUTIONS.....	0.00
7. TOTAL INDEPENDENT EXPENDITURES .....	13490.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

*[Electronically Filed]*

Sara Amundson

Sara Amundson

10/15/2014

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 2 OF 3  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee

Humane Society of the United States

Date of Public Distribution/Dissemination

MM / DD / YYYY  
10 / 08 / 2014

Mailing Address

2100 L Street NW  
Suite 310

Amount

525.00

Transaction ID : A576155CC1B074815880

Purpose of Expenditure  
List Rental for MailerCategory/  
TypeOffice Sought: ☒ House State: NJ  
☐ Senate District: 02  
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:  
Rep. Frank A. LoBiondoCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office Sought

7681.40

Disbursement For: ☐ Primary ☒ General  
2014  
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Humane Society Legislative Fund

Date of Public Distribution/Dissemination

MM / DD / YYYY  
10 / 08 / 2014

Mailing Address

2100 L St NW  
Ste 310

Amount

110.00

Transaction ID : A3BE0B6D5537F44C3A2C

Purpose of Expenditure  
Staff TimeCategory/  
TypeOffice Sought: ☒ House State: NJ  
☐ Senate District: 02  
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:  
Rep. Frank A. LoBiondoCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office Sought

7681.40

Disbursement For: ☐ Primary ☒ General  
2014  
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Candidate Command

Date of Public Distribution/Dissemination

MM / DD / YYYY  
10 / 08 / 2014

Mailing Address

1831 NW Vivion  
Ste. 101

Amount

6734.00

Transaction ID : ADB7C4D9EBE144A9EAF

Purpose of Expenditure  
Production and postage of MailersCategory/  
TypeOffice Sought: ☒ House State: NJ  
☐ Senate District: 02  
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:  
Rep. Frank A. LoBiondoCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office Sought

7681.40

Disbursement For: ☐ Primary ☒ General  
2014  
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 7369.00

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶  
(carry total from last page forward to Line 7)

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 3 OF 3  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee

Joe Trippi &amp; Associates

Date of Public Distribution/Dissemination

MM / DD / YYYY  
10 / 10 / 2014

Mailing Address

606A N. Talbot Street

Ste. #203

Amount

6000.00

Transaction ID : AE0DDD6DEF1C64D36968

Purpose of Expenditure

Online advertisements and landing page

Category/  
Type

Office Sought:



House

State: NJ



Senate

District: 02



President

Check One:



Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Rep. Frank A. LoBiondo

Calendar Year-To-Date Per Election  
for Office Sought

13802.40

Disbursement For:  
2014

Primary



General

☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Humane Society Legislative Fund

Date of Public Distribution/Dissemination

MM / DD / YYYY  
10 / 10 / 2014

Mailing Address

2100 L St NW

Ste 310

Amount

121.00

Transaction ID : A9099F26DDA8F4AD2AD0

Purpose of Expenditure

Staff Time for online ads and landing page

Category/  
Type

Office Sought:



House

State: NJ



Senate

District: 02



President

Check One:



Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Rep. Frank A. LoBiondo

Calendar Year-To-Date Per Election  
for Office Sought

13802.40

Disbursement For:  
2014

Primary



General

☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City

State

Zip Code

Purpose of Expenditure

Category/  
Type

Office Sought:



House

State: \_\_\_\_\_



Senate

District: \_\_\_\_\_



President

Check One:



Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For:



Primary



General

☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

6121.00

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

13490.00

(carry total from last page forward to Line 7)